ENVIRONMENTAL

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FILE TOPIC: Environmental

<u>Life Safety Code requires halls to be free and clear of all obstacles.</u> What if a chair is placed in the hall during the ambulation of a resident who can walk only fifty feet and needs the chair to rest before continuing to walk again?

The situation described would not be a problem. Life safety rules and regulations apply to equipment that has been stored (not in use) in the halls. As with any other item, such as laundry carts, food carts, resident care equipment, etc., items in use are not considered as relating to the rule mentioned.

FILE TOPIC: Environmental

What diagrams for circuit breakers are required at the electrical panel?

The National Electric Code requires a legible directory at the electrical panel. A legible handwritten directory is acceptable; however, if an illegible diagram/directory is found to be a repeat deficiency, a typed directory has been required in the past in order to solve the problem.

FILE TOPIC: Environmental

Is the use of a three-way adapter in a resident's electrical outlet against safety and fire regulations?

Yes, as a general rule. There may be exceptions.

Some three-way adapters are listed for the appropriate electrical load that one may wish to connect; however, you must not connect more electrical load to the adapter than it is listed for. A grounding type adapter would be required to be used in a health care setting if allowed by the fire official under section 704 of the North Carolina Fire Prevention Code and the device complies with the National Electrical Code. Generally, the National Electrical Code would allow a grounded adapter in a health care facility if the adapter were listed by an agency such as the Underwriter's Laboratory and if the device is only used with a total connected load that does not exceed the adapter's amperage or wattage rating. A new provision of the 1993 National Electrical Code mandates that all new or replaced receptacles must be "hospital grade" listed at this time.

This would have to be evaluated on a case by case basis as determined by the DFS inspector, the local fire official and/or the local electrical inspector based upon the device, the connected load, and the specific use intended.

It is best not to use these devices because the tendency is to overload them and overloading may cause a fire. These devices may not provide the solid electrical connection needed to prevent shock hazards for the resident.

FILE TOPIC: Environmental

When stripping and waxing floors as is done annually, where can we put the furniture from the floors while we are working in the rooms? How can the resident's privacy be assured during this period?

Furniture cannot be left unattended in any corridor that is a path to an exit. Residents who are partially or completely confined to their beds may be moved to areas which provide for privacy (such as a solarium) or privacy screens may be employed.

FILE TOPIC: Environmental

What are the requirements regarding heat detectors in resident room closets of nursing homes?

One condition requiring such installation is in a facility certified for Medicare/Medicaid which, because of construction type, requires complete sprinkler coverage. The facility is required to meet the Life Safety Code which cites NFPA 13 for installation of sprinkler systems. NFPA 13 requires the installation of sprinkler heads in all spaces, including closets. If such a facility was built without total sprinkler coverage, it may be able to meet the Life Safety Code by waiver of the sprinkler system. Fire Safety Survey Report 1985 Code-Health Care (HCFA 2786P) requires in Part III, copy attached, at tag K81, the installation of automatic fire detection devices (heat detectors) in all areas required by the Life Safety Code to be protected by an automatic sprinkler system. Compliance with tags K80 through K83 is required before a waiver of the sprinkler requirement can be granted.

- Part III Alternative Provisions for Sprinkler Requirements
 - If K56 on sprinkler coverage has been answered "NOT MET" and the facility is a one-story protected wood frame or one-story protected ordinary facility, answer the next four items.
- K80 Hazardous Areas All hazardous areas are sprinklered.
- K81 Detection Systems Automatic fire detection devices are installed in all areas required by the Life Safety Code to be protected by an automatic sprinkler system. The detection system is currently listed with UL's Fire Protection List. The system is arranged to close all fire doors in barrier partitions and where possible, shall be connected to the local fire department or central control station. At a minimum, the detection system must activate an alarm system inside and outside the building.
- K82 Compartmentation Resident rooms are separated from each other and all other areas by construction having at least 1 hour fire resistance rating.
- K83 Fire Department Response The response time and capability of the local fire department is adequate, in the judgment of the State fire authority official, to provide an acceptable level of protection for an unsprinklered facility.

FILE TOPIC: Environmental

Is the facility required to post "No Smoking, Oxygen in Use" signs on resident doors when the facility is a smoke free facility that has a sign at the front entrance requesting that all smoking materials be extinguished before entering the facility?

No. In healthcare facilities where smoking is prohibited and signs are prominently placed at all major entrances, secondary signs with language that prohibits smoking are not required. Facilities may opt to place these signs in the building.

FILE TOPIC: Environmental

May housekeeping duties be performed on the nursing units while meal trays are being served?

Yes, as long as no contamination of food occurs and there is no disruption to the areas in which residents are actually eating.

FILE TOPIC: Environmental

What is a Fire Safety Evaluation System (FSES)? May it be substituted for compliance with the Life Safety code (LSC) in life safety surveys?

Federal regulations require facilities to be in compliance with the Life Safety Code (LSC), which sets federal fire protection standards. Generally, a facility may meet this requirement either by complying with the requirements of the edition of the LSC applicable to the facility or by achieving a passing score on an equivalency instrument known as the Fire Safety Evaluation System (FSES). The FSES is designed to assess whether or not a facility's existing life safety features protect occupants of the facility in a manner equivalent to meeting the literal requirements of the LSC. An FSES evaluation assigns numerical values to specific building and operating features such as sprinklers, exit distances, building height, age of occupants, ability of occupants to evacuate, resident/staff ratios, etc. Then, the FSES uses a mathematical formula similar to a grading system to determine if a building, while not meeting every LSC requirement, has the equivalent safety of a building that does meet all the requirements of the LSC.

If a facility is cited for a life safety deficiency under the LSC, the facility must submit a plan of correction. When submitting its plan of correction, the facility may request an evaluation under FSES. A facility that is evaluated under FSES may have to add to or correct certain features of the building or staffing arrangements to attain a passing score. Sometimes, equivalent safety cannot be attained without repairs or additional features that would cost virtually the same as compliance with the LSC. If the facility elects to be in compliance using FSES, it may have to revise its plan of correction to accommodate the changes needed to achieve passing scores on the FSES and/or correct those deficiencies that are not within the scope of the FSES.

Actual compliance with the LSC may be preferable to compliance using FSES because a facility operating under FSES compliance is more likely to be out of compliance if there is a change in FSES evaluation factors, e.g. staffing or changes in resident population, than a facility in compliance with the LSC.

FILE TOPIC: Environmental

What should water temperatures be in resident care areas?

Licensure rule .3404(d) states, "A flow of hot water shall be within safety ranges specified as follows:

Resident Areas - 6 1/2 gallons per hour per bed and at a temperature of 100 - 116 degrees F."

FILE TOPIC: Environmental

What are the proper laundry and dietary water temperatures?

Licensure rule .3404(d) states, "A flow of hot water shall be within safety ranges specified as follows:

Dietary Services - 4 gallons per hour per bed and at a minimum temperature of 140 degrees F, and

Laundry Area - 4 1/2 gallons per hour per bed and at a minimum temperature of 140 degrees F".

FILE TOPIC: Environmental

Can air filter machines be utilized in a resident's room?

Yes, if:

- 1. The machine has no built-in electric heat.
- 2. The building electrical system has sufficient capacity to safely power the unit(s).
- 3. The unit is listed and maintained in accordance with the requirements of a nationally recognized test lab such as Underwriters Laboratory. or Intertek.
- 4. The unit is arranged so as not to produce a trip hazard from the cord.

FILE TOPIC: Environmental

Can aerosol spray cans be used and stored in residents' rooms, i.e. hair sprays, Lysol and deodorant? These would have the resident's name and room number on them. What about household items?

Interpretive guidance found at tag number F 323 addresses storage of potential hazards in facilities. It says, "Supervision and/or containment of hazards are needed to protect residents from harm caused by environmental hazards. Examples of such hazards can range from common chemical cleaning materials to those caused by adverse water temperatures or improper use of electrical devices.

Chemicals and Toxins. Various materials in the resident environment can pose a potential hazard to residents. Hazardous materials can be found in the form of solids, liquids, gases, mists, dusts, fumes, and vapors. The routes of exposure for toxic materials may include inhalation, absorption, or ingestion.

For a material to pose a safety hazard to a resident, it must be toxic, caustic, or allergenic; accessible and available in a sufficient amount to cause harm. Toxic materials that may be present in the resident environment are unlikely to pose a hazard unless residents have access or are exposed to them. Some materials that would be considered harmless when used as designed could pose a hazard to a resident who accidentally ingests or makes contact with them.

Examples of materials that may pose a hazard to a resident include:

- Chemicals used by the facility staff in the course of their duties (e.g., housekeeping chemicals) and chemicals or other materials brought into the resident environment by staff, other residents, or visitors;
- Drugs and therapeutic agents;
- Plants and other "natural" materials found in the resident environment or in the outdoor environment (e.g., poison ivy).

One source of information concerning the hazards of a material that a facility may obtain is its Material Safety Data Sheet (MSDS). The Occupational Safety and Health Administration (OSHA) requires employers to have a MSDS available for all hazardous materials that staff use while performing their duties. MSDSs are available on-line for numerous chemicals and non-toxic materials, and should be reviewed carefully to determine if the material is toxic and poses a hazard. Poison control centers are another source of information for potential hazards, including non-chemical hazards such as plants."

There are multiple health regulations that address materials that residents can keep in their rooms. Life Safety Code and fire standards have specific guidance regarding electrical equipment, extension cords, etc. that may or may not be allowed. A facility should check with the Construction Section regarding the use of appliances, space heaters, extension cords, etc. before using.

Following is a list of federal and state rules addressing the two areas: medications and household items.

Medications

Federal Requirements

F176 483.10(n)

F425 483.60(a)

F431 483.60(d)

F432 483.60(e)

State Rules

10A NCAC 13D .2306

10A NCAC 13D .2604

10A NCAC 13D .2605

Household Items

Federal

| No Prefix | 483.10(1) |
|-----------|------------------|
| F252 | 483.15(h)(1) |
| F253 | 483.15(h)(2) |
| F323 | 483.25(h)(1)&(2) |
| F454 | 483.70 LSC |
| F465 | 483.70(h) |

State Rule 10A NCAC 13D .3400

State Statute 131E-117(14)

The above list is not all inclusive of the regulations and rules but should provide guidance to facilities in evaluating what kinds of medications and household items should or should not be kept in a resident's room and under what conditions they should be kept in a resident's room. Assessment and care planning are an important part in determining the utilization of these items. Also, the resident population of the facility and/or unit population is important in making determinations about the use of these items.

FILE TOPIC: Environmental

What are the regulations pertaining to cubicle curtains re: 1) replacement requirements; 2) diameter (gauge) of mesh openings; and 3) distance of curtain from sprinkler head?

The Life Safety Code interpretive guidelines indicate that nursing facilities should all have cubicle curtains with 1/2 inch mesh by November, 1996. If facilities do not have 1/2 inch mesh or greater, they can rehang cubicle curtains to the distances specified in National Fire Protection Association NFPA-13, Table 4-2.5.2 (attached).

FILE TOPIC: Environmental

Can housekeeping or laundry carts be stored on the floor during meal delivery and feeding?

No. Carts can only be on the halls when in actual use. Carts cannot be stored in the halls.

FILE TOPIC: Environmental

What is the acceptable practice for surveyors to take temperatures (food, water, room, etc.), specifically using their thermometer, the facility's or both?

Water temperature should be taken with a glass bulb thermometer of scientific quality. Food temperature should be taken with a quality meat thermometer. The thermometer may belong to either the facility or surveyor.

How does the facility know the surveyor's thermometer is calibrated correctly, etc.?

The surveyor will allow facility staff to compare the facility thermometer to the surveyor thermometer at the same test location. Calibration can be checked by using an insulated cup with crushed ice/water swirled around for two minutes. The thermometer should read 32 degrees F in this solution.

Should the surveyor take the temperatures in the presence of a staff member?

Yes.

How is a room temperature taken?

Room temperature is taken with a sling psychrometer which has two glass bulb, mercury filled thermometers that are twirled in the air for two minutes.